cord injury; Pressure ulcer

Introduction.– Pressure ulcer is the most common complication after spinal cord injury and is frequently in this population as an educational theme of predilection [1]. Therapeutic education by improving the understanding of the patients' needs enables the team to personalize the care management offered.

Methods.– The design of the ETP pressure ulcer guide was conducted according to the SOFMER methodology, i.e. constitution of a working group, literature review and best practices study. The working group included members of APF, SOFMER, PERSE and AFIGAP.

Results.– The guide underlines the educational outcomes, needs evaluation, various educational actions possible and assessment of educational approaches. It is made of theoretical and methodological reminders as well as practical examples.

Discussion.– This guide can help teams design or update their educational approaches in the field of pressure ulcer management in persons with SCI. It can be the base for evaluating clinical practices in PM&R settings.

Reference

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The Common European Framework of Reference and teaching of neurological semiology in a PRM department: Providing a task-based approach

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Keywords: Teaching; Medical semiology; Task-based approach; Common European Framework of Reference

Objective.– The Common European Framework of Reference constitutes the basis of language teaching in Europe and stresses the need of autonomy through a "task-based approach". We aimed to study the relevancy of this approach in a Physical and Rehabilitation Medicine (PRM) department for the training course of neurological semiology.

Material.– We alternately compared two educational methods, simultaneously in a spinal cord injury (SCI) unit and in a general-neurological PRM unit: a "task-based approach" (TBA) and an "observational approach" (OBA). Thirty-eight students were included. Final clinical examination of a hemiplegic patient by the students was assessed with specific grids and questionnaires evaluated the students' point of view.

Results.– When TBA was applied to the specialized unit and OBA to the other unit, the final level was similar between both groups. When TBA and OBA were applied in the opposite way, TBA group's level was maximized and OBA minimized. Estimation of the training course is always better for TBA groups.

Discussion.– TBA seemed to improve students' "knowledge mobilization". Acquired level of students who examined only SCI patients during the training course was as high as the other students when evaluated on the examination of a brain-injured patient. It also represented a time-saving method.

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Strategies for using evidence to improve outcomes in rehabilitation

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Introduction.– Evidence is needed to improve patient outcomes in rehabilitation and clinical practice often lags behind research evidence. Knowledge translation involves both creating and applying knowledge, and several activities are necessary to change professional behavior in favor of evidence based practice (EBP). The aim of this study was to describe methods used to integrate EBP in clinical work at Sunnaas hospital 2003–2013.

Materials and methods.– Three hundred and twelve health professionals (physicians, psychologists, PTs, OTs, nurses, social workers and speech pathologists). A strategy was used to academize all health-professional groups, establish international co-operation and combine clinic/university/research positions. EBP projects, Journal Clubs and inter-disciplinary teamwork were used to change clinical behavior. Competency groups consisting of clinicians and researchers have developed guidelines for specific topics.

Results.– An increase from 3 PhD/1 Professor 2003 to 30 PhD/15 Professors 2013, 15% of employees have Master Degrees. Evidence-based recommendations have been implemented into clinical practice for cognitive rehabilitation, spasticity, urology, aphasia and drivers license assessment. New evidence-based methods are continually integrated in the clinic as for example mirror therapy, virtual reality, and robotics.

Discussion.– Several activities and a strategic plan were needed to build an interdisciplinary research environment and to integrate EBP into clinical practice.

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Posters

P184-e

Turkey filet with olive: Relevant phantom model to learn ultrasound-guided botulinum toxin injections

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Keywords: Spasticity; Botulinum toxin; Medical education; Ultrasonography; Simulation

Objective.– To develop a cheap and available phantom model to learn ultrasound-guided botulinum toxin injections and evaluate its acceptability.

Methods.– Eight residents performed an exercise that consisted in injecting an olive, serving as the target, placed within a piece of turkey filet with ultrasonography guidance. For each attempt three scores measures the quality of the image, the accuracy of the injection and the duration of the exercise. The residents were asked to assess on a visual analogic scale the perceived difficulty of the exercise and their satisfaction with the session. The ability of the resident to add correctly the legend to an anatomic and ultra-sonographic chart was also measured.

Results.– The phantom does allow the practice of echo-guided injections. All residents obtain an acceptable score for at least one of their three attempts. Anatomic knowledge appears to be insufficient.

Discussion/Conclusion.– A short session of training on such a phantom model is relevant as part of an overall training program in order to learn intramuscular botulinum toxin injection.

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